Form **8872**(November 2002)

Political Organization Report of Contributions and Expenditures

OMB No 1545-1696

Department of the Treasury Internal Revenue Service

▶ See Seperate instructions.

A	For the period beginning Janua	ry 1	,20 13	and ending	June 30	, 20 13	
		-					
В	Check applicable boxes Intial report		Change of address	Amende	ed report	Final report	
1	Name of organization		Employer identification number				
PROGRESS PAC FOR CENTRAL ARKANSAS						71 0793799	
2	Mailing address (P.O. Box or number, street, and	room or s	suite number)				
<u>P.C</u>	D. BOX 1713 City or town, state, and ZIP code						
LIT	TLE ROCK, AR 72203						
3	E-mail address of organization				4 Date orga	inization was formed	
	b@brownrogers.com				4 Date Orga	inization was formed	
	Name of custodian of records	5b	Custodian's address	 			
			P.O. BOX 1713				
JAY	Y CHESSHIR		LITTLE ROCK, AR 72203				
			LITTLE ROCK, AF				
6a	Name of contact person	6b Contact person's address					
	DI DENNETT		1 EXECUTIVE CENTER COURT, STE. 100				
IVIA	RK BENNETT		LITTLE ROCK, AR 72211				
7	Business address of organization (if different from						
•	business address of organization (if different from	i mailing a	duress shown above)	Number, street, an	a room or suite no	umber	
	City or town, state, and ZIP code						
	, , , , , , , ,						
8	Type of report (check only one box)		- · · · · · · - · · · · · · · · · · · ·				
			f Monthly repor	t for the month of			
а	First quarterly report (due by April 15)		(due by the 2	20th day following	the month show	n above, except the	
			December re	port, which is due i	by January 31)		
b	Second quarterly report (due by July 15)		g Pre-election re	eport (due by the 12	2th or 15th day be	fore the election)	
			(1) Type of el	ection			
С	Third quarterly report (due by October 15)		(2) Date of el	ection			
	гт.,		(3) For the st	ate of			
d	Year-end report (due by January 31)		. 🗆				
_	7 M.J				by the 30th day a	fter general election)	
е	✓ Mid-year report (Non-election year only-due by July 31)		(1) Date of election(2) For the state of				
	,,,,,		(2) For the sta	ate of			
						0	
9	Total amount of reported contributions (total from	all attach	ed Schedules A)		9		
					1 1	0	
10	Total amount of reported expenditures (total from	all attache	ed Schedules B)	<u> </u>	10		
	Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete						
Sig	n /				/ 1		
Не				k	07/29/	13	
3	Signature of authorized official			——	Date //		
For F	Paperwork Reduction Act Notice, see separate	nstruction	ıs.	Cat No 30406G	Fo	orm 8872 (11-2002)	

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Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization	Employer identification numb	
PROGRESS PAC FOR CENTRAL ARKANSAS	None of contributed and love	71 0793799
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
	year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
	Gorninbutor's occupation	\$
	Aggregate contributions	Date of contribution
	year-to-date > \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions year-to-date ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
		A thought of contribution
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	year-to-date ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
	Contributor a occupation	s
	Aggregate contributions	Date of contribution
	year-to-date > \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$ Date of contribution
	Aggregate contributions year-to-date ▶ \$	Date of Contribution
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
		\$
	Aggregate contributions year-to-date . ▶ \$	Date of contribution
Contributor's name, mailing address and ZIP code	year-to-date . > \$ Name of contributor's employer	Amount of contribution
		, in sain of commons,
	Contributor's occupation	
		\$
	Aggregate contributions	Date of contribution
2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	year-to-date . ▶ \$	
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contribution
	Contributor's occupation	
	S issuer o ossupation	\$
	Aggregate contributions	Date of contribution
	year-to-date ▶ \$	

Schedule B Itemized Expenditures	Schedule B page 1 of 1	
Name of organization	Employer identification number	
PROGRESS PAC FOR CENTRAL ARKANSAS	Name of recepent's employer	71 0793799
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
	İ	
Division of an enditure	<u> </u>	
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	pient's name, mailing address and ZIP code Name of recipient's employer	
	Recipient's occupation	\$ Date of expenditure
	necipient's occupation	Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure	<u></u>	
		Amount of expenditure
Recipient's name, mailing address and ZIP code	pient's name, mailing address and ZIP code Name of recipient's employer	
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
	Recipient's occupation	\$ Date of expenditure
Purpose of expenditure		
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of expenditure
		\$
	Recipient's occupation	Date of expenditure
Purpose of expenditure		
Subtotal of expenditures reported on this page onl line 10 of Form 8872	y Enter here and also include this amount in the to	otal on • • • • • • • • • • • • • • • • • •
		